

×	8 □	a spouse or dependent child tee on Ethics.	committee on Ethics.	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Commit	arned" incomess you have fire	ther assets, "une inswer "yes" unle	this report any c	nou excluded from three tests for exert	ON—Have y ey meet all ti	EXEMPTIC because the
×	Yes 🗌	not be	excepted trusts" need not be lent child?	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted t disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child?	nittee on Ethic ting you, your	wed by the Comnuch a trust benefit	nd Trusts" approport details of su	rding "Qualified Bli	Details regar	TRUSTS-I
Ø	EACH OF THESE QUESTIONS	OF THESE	20	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWE	T INFORI	I, OR TRUS	EPENDEN:	SPOUSE, DI	ON OF	EXCLUS
	esponse.	ttached for each "Yes" response	נפ	Each question in this part must be answered and the appropriate schedule	and the a	be answered	is part must	question in thi	Each	
No X	Yes	1 \$5,000 from	VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Schedule VI.	VI. Did you receive compensate a single source in the two prior if yes, complete and attach S	₹	Yes X	have any report- orting period?	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III.	your spouse, c more than \$10 lete and attac	III. Did you,) able liability (If yes, compl
×	eg	urangement	eportable agreement or arrangement attach Schedule V.	V. Did you have any reportable with an outside entity? If yes, complete and attach Se	<u>\$</u>	√es ×	receive "unearmed od or hold any end of the period	II. Did you, your spouse, or a dependent child receive "uneamed" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule II.	our spouse, on the spouse of the spouse, or	II. Did you, y income of mo reportable as If yes, compl
S _o	Yes X	before the date ior two years?	eportable positions on or before the date calendar year or in the prior (MO years? attach Schedule IV.	IV. Did you hold any reportable of filing in the current calendar y ff yes, complete and attach Si	N _o	Yes ×	e (e.g., salaries or porting period?	 Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I. 	your spouse I or more from lete and attac	I. Did you or fees) of \$200 If yes, compl
			<i>,</i>	In all sections, please type or print clearly in blue or black ink PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS	OF THES	VER EACH	N — ANSV	In all sections, please type or print clearly in blue or black ink PRELIMINARY INFORMATION — ANSW	s, please typ	In all section PRELIMI
:	more than 30 days late.	more than	×			g Office:	Employing Office:	employee	en	
assessed who files	A \$200 penalty shall be assessed against any individual who files	A \$200 pen against an	Check if Amendment	11/4/2014	Date of Election:	10 1L	State: ves District: _	Candidate for the House of Representatives	X Kg	Filer
	(Office Use Only)					-				
)		Daytime Telephone:	Daytime			old, Jr.	Robert J. Dold, Jr.	Name:
RATIVES	2014 MAY -9 PM 4 bades or 6. OFFICE OF THE CLERK US. HOUSE OF REPRESENTATIVES	2014 MA) OFFICE U.S. HOUSE	M B s and new employees	FORM B For use by candidates and new	T	, 2012	REPRESENTATION ATEMENT - December 31, 2012	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2012 - December 31, 2012	STATES AL DISC vered: Jan	UNITED FINANCI Period co

SCHEDULE I— EARNED INCOME (INCLUDING HONORARIA)

Robert J. Dold, Jr.

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned exceeding to the source for other spouse earned.	than the filer's current employme amount of any honoraria; list onl	ent by the U.S. Government) totalling \$200 or y the source for other spouse earned income	nt) totaling \$200 or use earned income
Exclude: Military pay (such as National Guard or Reserve pay), federal refir	rement programs, and benefts re	eceived under the Social !	Security Act
Source (include date of receipt for honoraria)	The	Amount	numt
	edt.	Chrent Year to Filling	Preseding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Examples: First Bank & Trust Houston, TX	Director's Fee	\$400	\$3,200
XYZ Yade Association, Chicago, IL (Redd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spause Salary	NA	NA.
Rouse of Representatives - Nembers Services	Salary	N/A	N/A
Department of the Treasury	Spouse Salary	N/N	N/A
Rose Exterminator Company, Inc.	Salary	42,307	-0-
White Whale Consulting, LLC	Salary	75,000	-0-

This page may be copied if more space is required.

See attached schedule	SP. SP Maga Corp. Stock DC. Examples: Simon & Schuder JT 1st Bank of Pastockh KY accounts	For an ownership interest in a primarily-hald bushness but a not publicly traded, shall the name of the businase, the haster of the activities, and the geographic location in Block A. Estaluete: Your personal residence, including second homes and vectico, homes (unless there was remain income same the reporting particle, any deposits traditions of the sporting particle, and gry several interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (37), in the optional column on the first, your spouse (37), in the optional column on the first, For a dehalled decusation of Schedule II requirements, please refer to the instruction booties.	BLOCK A Asset and/or Income Source librity (a) each asset hald be investment or production of income with a fair matrix value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or accruse of income which generated more tent \$200 in "unearned" income during the year. Provide complete names of stocks and mutual funds (do not use fictor symbols). For att IPAs and other retherent plane (such as 401(t) plans) provide the value for each used hald in the account that exceeds the reporting thresholds. For rental or other resi property hald for investment, provide a complete address or a description, ap, "rental property" and the oby and state.
	indefinite	None >	BLOCK B Value of Asset value of Asset value of Asset at close of year. If you use a valuation offer than fair market value, pacify the method used. et was sold during the report and is included only because thed income, the value should a."
	×	DIVIDENDS INTEREST EXCEPTED/BLINO TRUST Other Type of Income (Speak): e.g., Partnership Income or Farm Income)	BLOCK C Type of income Chack all columns that apply For refrement accounts that deply For refrement accounts that do not allow you to choose specific investments or first generate to- depend income (such as 401(s)) plane or IPAs), you may check the Tac-Defend or others. Divisionist, interest, and capital gains, even if refreseleds, street be dis- closed as income. Check Thors if the asset generated no income during the reporting period.
		\$1 - \$200 = \$1,001 - \$2,500 < \$5,001 - \$15,000	BLOCK D Amount of income For assets for which you checked "fax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be declosed as income. Check "None" if no income was earned or generated. * This column is for income derived from assets solely held by your spouse or dependent child.
		\$1 - \$200 = \$1,001 - \$2,500 \$ \$5,001 - \$15,000 \$ \$50,001 - \$100,000 \$ \$11,000,001 - \$5,000,000 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	BLOCK D Amount of income Amount of income which you checked "lax-Deferred" in Block C, you may not column. For all other assets, indicate the category of adding the appropriate box below. Dividends, interest, gains, even if reinvested, must be disclosed as ix "None" if no income was earned or generated. Is for income derived from assets solely held by your sendant child.

Continuation Sheet (If needed)	SCHEDULE II - ASSETS AND "UNEARNED" INCOME
Robert J. Dold, Jr.	!
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-													·				Asset and/or income Source	BLOCK A
													None			>		
, Opt	şê									·			\$1,001 - \$15,000			G		
										· .			\$50,001 - \$100,000			m	¥ E	
													\$250,001 - \$500,00	o ·		Ð	Value of Asset	BLOCK B
							į						\$1,000,001 - \$5,000	0,000		-	Ass	6
													\$25,000,001 - \$60,0	0,00	00	7		
													Spouse/DC Asset ove	r \$1,0	0,000	000. ₹		
													DIVIDEND8	•	•		ر	
													INTEREST				Type of Income	B 10
		_											EXCEPTED/BLIND	THUS	π		100	BLOCK C
ran,								 -					Other Type of Inco Partnership Income o				8	
													\$1 \$200		**			
													\$1,001 - \$2,590		7	δ		
					-								\$5,001 - \$15,000		\$	Curren		
													\$50,001 - \$100,000		S.	int Year		
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				•			,						Specialità interna aver \$1,60	S.440°	¥		3	BLOCK D
_7													\$1 - \$200		-		80	ê
													\$1,001 - \$2,500		2	Pa	3	
													\$5,001 - \$15,000		≤	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
													\$50,001 - \$100,000		T.	Preceding Year		
									,				\$1,000,001 - \$5,000,00	00	×	2		
													Special@C inchmé eler (1,6)	0,007	Ä			

SCHEDULE III — LIABILITIES

Name Robert J. Dold, Jr.

Page 5

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ture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000. Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furnished during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furnished.

								Amo	Int of	Amount of Liability	₹			
<u>유</u>		Date Liability		A	8	င	0	П	<u> </u>	ີດ			٠ د	
٦ ,۶	Creditor	incurred mo/year	Type of Liability	10,001— 15,000	15,001 50,000	50,001 100,000	100,001 250,000	250,001— 500,000	500,001— 1,000,000	1,000,001— 5,000,000	5,000,001 25,000,000 25,000,001-	150,000,000	Over 50,000,000 Spouse/DC	
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE				Н	Ц		_	Ш	_		
JT	Charter One Bank	10/03	Mortgage on 414 Frontage Rd. Northfield, IL 60093					×						
	Sallie Mae	1999	Student Loan		×									
	Wunderlich Securities	2009	Loan		×									
SP	TSP	02/12	Loan		×									

SCHEDULE IV — POSITIONS

any nonprofit organization, any labor organization, or any educational or other institution other than the United States Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise,

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization); and positions solely of an honorary nature

and positions series of an inclinion of materior	MARIO C.
Position	Name of Organization
Managing Member	Rose Pest Solutions, LLC d/b/a Imperial Pest Management
President	Rose Exterminator Company, Inc.
Managing Member	White Whale Consulting, LLC
Secretary	America's Infrastructure Alliance
Board Member	Boy Scouts of America, Northeast Illinois Council

Use additional sheets if more space is required.

SCHEDULE V - AGREEMENTS

Name Robert J. Dold, Jr.

Page 6 of 6

efit plan maintained by a former employer.	service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an	Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during	
•	participation in an employee welfare or ben-	ave of absence during the period of government	

one press meanings	ent piati mantamed by a tottile employer.	
Date	Parties To	Terms of Agreement
	None	

SCHEDULE VI — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule I.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
Intel Corporation, Santa Clara, CA	Consulting Services

GPO: 2013

78-995 (mac)

ROBERT J. DOLD, JR.
FORM B
SCHEDULE II - ASSETS AND "UNEARNED" INCOME

Asset antifor income Source	Value of Asset	Type of Income	1MM3 - 61613	2012
414 Frontage Road, Northfield, IL	\$500,001 - \$1,000,000	Rent	\$2,501 - \$5,000	\$5,001 - \$15,000
2711 Douglas Avenue, Racine Wisconsin	\$50,001 - \$100,000	Rent	\$1 - \$200	
Kellogg stock (NYSE: K)	\$1,001 - \$15,000	Dividends	\$1 - \$200	\$1 - \$200
Wintrust Financial Corporation stock (NasdaqGS: WTFC)	\$1,001 - \$15,000	Dividends	\$1 - \$200	\$1 - \$200
McDonalds Corp. stock (NYSE: NCD)	\$15,001 - \$50,000	Dividends	\$1 - \$200	\$1-\$200
Procter and Gamble stock (NYSE: PG)	\$50,001 - \$100,000	Dividends	\$201 - \$1,000	\$2,501 - \$5,000
BP stock (NYSE: BP)	\$1,001 - \$15,000	Dividends	\$1 - \$200	\$201 - \$1,000
American International Group stock (NYSE: AIG)	\$1,001 - \$15,000	Dividends	\$1 - \$200	\$1 - \$200
Cisco Systems Inc. stock (Naedaq: CSCO)	\$1,001 - \$15,000	Dividends	\$1 - \$200	\$1 - \$200
Dell inc. stock (Nasdaq: DELL)	\$1,001 - \$15,000	Dividends	\$1 - \$200	\$1-\$200
TD Ameritade Holding Corp stock (Needaq: AMTD)	\$1,001-\$15,000	Dividends	\$1 - \$200	\$1~\$200
Time Warner Cable stock (NYSE: TWC)	\$1,001 - \$15,000	Dividends	\$1 - \$200	\$1 - \$200
Time Warner Inc. New stock (NYSE: TWX)	\$15,001 - \$50,000	Dividends	\$201 - \$1,000	\$201 - \$1,000
1RA - Entergy Ark Inc 4.72% Pfd stock (OTC BB: EGRKI.OB)	\$1,001 - \$15,000	Dividends	\$201 - \$1,000	\$201 - \$1,000
IRA - Dodge & Cox International Fund (Nasdeq DODFX)	\$1,001 - \$15,000	Dividends	\$201 - \$1,000	\$201 - \$1,000
IRA - Fundamental Investors Class A (Nasdag ANCFX)	\$1,001 - \$15,000	Dividends	\$1 - \$200	\$1 - \$200
IRA - Growth Fund of America Class C (Nesdaq: GFACX)	\$1,001 - \$15,000	Dividends	\$1 - \$200	\$1 - \$200
IRA - Keeley Small Cap Value Fund Class A (Nesdaq: KSCVX)	\$1,001 - \$15,000	Dividends	\$1 - \$200	\$1 - \$200

ROBERT J. DOLD, JR.
FORM B
SCHEDULE II - ARSETS AND "UNEARNED" INCOME

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All outstanding units of White Whale Consulting, LLC - a general consulting company located in Northfield.	20% of the outstanding units of Fourstainhead Partners, LLC - a rental property located in Michigan City, Indiana.	30% of all outstanding stock of Rose Exterminator Co., Inc a pest management company located in Northfield Illinois.	All outstanding units of Rose Pest Solutions, LLC D/B/A imperial Pest Management - a pest management company located in the Racine Wisconsin area.	SP Ameritrade IRA Rotlover - Intel Corp. stock	SP Ameritrade IRA Rollover - Insured Deposit Account	SP Jenus Orion Fund J Shares - Traditional IRA	Rose Exterminator Company, Inc. 401(k) plan - Principal Financial Group - Mortey Financial Services Stable Value Sig Fund	BLOCK A Asset and/or income Source
\$1,001 - \$15,000	\$15,001 - \$50,000	\$1,000,001 - \$5,000,000	\$100,001 - \$250,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	BLOCK B Value of Asset
Net income from the activity	Rental Income	Dividends	Net income from the activity	Dividends	Interest	Dividends	Dividends	BLOCK C
\$50,000 - \$100,000	None	None	None	\$1-\$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	BL Amoun Current year 1/1/13 - 5/15/13
None	None	Nane	None	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	BLOCK D Amount of Income year Preceding Year 15/13 2012